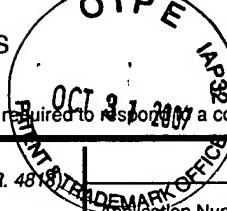


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)

Complete if Known

FEE TRANSMITTAL for FY 2007

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

665.00

TRADEMARK OFFICE

Application Number

10/609,019

Filing Date

June 26, 2003

First Named Inventor

Richard K. Cooper et al.

Examiner Name

SINGH, Anoop Kumar

Art Unit

1632

Attorney Docket No.

51687-0101 (287015)

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order None Other (please identify) : _____ Deposit Account Deposit Account Number: 16-1435 Deposit Account Name: Kilpatrick Stockton LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$) Fee (\$)

50

25

Each independent claim over 3 (including Reissues)

200

100

Multiple dependent claims

360

180

Total Claims Extra Claims Fee(\$) Fee Paid (\$)

$$\text{---} - 20 \text{ or HP} = \underline{\quad} \times \underline{\quad} = \underline{\quad}$$

Fee (\$)

Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee(\$) Fee Paid (\$)

$$\text{---} - 3 \text{ or HP} = \underline{\quad} \times \underline{\quad} = \underline{\quad}$$

Fee (\$)

Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	- 100 = _____ / 50 = _____	(round up to a whole number) x _____ = _____	_____	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : RCE (\$405); 2 Independent Claims (\$210); 2 Dependent Claims (\$50) 665

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	47,040	Telephone	(336) 607-7300
Name (Print/Type)	Cynthia B. Rothschild			Date	October 31, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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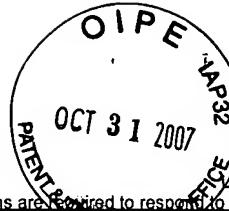
EXPRESS MAIL CERTIFICATE

"Express Mail" Label No. : EV 740 532 125 US
Serial No. : 10/609,019
Applicant(s) : Richard K. Cooper et al.
Filing Date : June 26, 2003
Title : *Gene Regulation in Transgenic Animals Using a Transposon-Based Vector*
Examiner : SINGH, Anoop Kumar
Group Art Unit : 1632
Type of Document(s) : Express Mail Certificate;
Transmittal Form;
Fee Transmittal for FY 2007 (*in duplicate*);
Credit Card Payment Form PTO-2038 for \$665.00;
Amendment and Response To Final Office Action
(22 pages) (*first page in duplicate*);
Request for Continued Examination (RCE) (*in duplicate*); and
Return Postcard

I hereby certify that the documents identified above are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and are addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Debbie K. Cooke (signature)
Debbie K. Cooke

Date Mailed: October 31, 2007



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/609,019
Filing Date	June 26, 2003
First Named Inventor	Richard K. Cooper et al.
Art Unit	1632
Examiner Name	SINGH, Anoop Kumar

Attorney Docket Number 51687-0101 (287015)

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="margin-left: 20px;">See Remarks</div>
<input type="checkbox"/> Remarks <div style="font-size: small;"> Express Mail Certificate (No. EV 740 532 125 US); Credit Card Payment Form PTO-2038 for \$665.00; Request for Continued Examination (RCE); and Return Postcard </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Kilpatrick Stockton LLP		
Signature			
Printed name	Cynthia B. Rothschild		
Date	October 31, 2007	Reg. No.	47,040

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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Typed or printed name		Date

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